PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifica	ed below or directed oth	ig the Patent, advance or erwise in Block 1, by (a	specifying a new co	orresp	ondence address; and/or	(b) mulcaming a separ	Tate TEE ADDRESS TO	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)					Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
HOFFMAN WARNICK LLC TS STATE STREET 14TH FLOOR ALBANY, NY 12207					Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
					Stacie Herm	(Depositor's name)		
					/Stacie Hei	rera/	(Signature)	
				L	12-	18-08	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/595,228 07/13/2006 Cor Voorwinden SC12923ET 5132 TITLE OF INVENTION: CONTROLLING POWER SUPPLY BETWEEN A VOLTAGE GENERATOR, A LOAD AND A RECHARGEABLE BATTERY								
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$300		\$0	\$1810	01/08/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	S				
TSO, EDWARD H		2838	320-107000					
1. Change of correspond CFR 1.363). Change of corresp Address form PTO/S "Fee Address" inc PTO/SB/47: Rev 03- Number is required	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) Freescale Semiconductor, Inc. Austin, TX								
Please check the appropriate assignee category or categories (will not be printed on the patent):								
4a. The following fee(s) ☑ Issue Fee ☑ Publication Fee (☐ Advance Order -	are submitted: No small entity discount # of Copies	permitted)	 D. Payment of Fec(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number					
a. Applicant clair	atus (from status indicate ns SMALL ENTITY stat nd Publication Fcc (if rec	tus. See 37 CFR 1.27.	ed from anyone other t		ger claiming SMALL EN he applicant; a registered		FR 1.27(g)(2). he assignce or other party in	
Authorized Signature	k Office.		Date	1174 / 41,711	2 /15/08			
Typed or printed nar This collection of inform an application. Confide submitting the complete this form and/or sugges Box 1450. Alexandria, Virginia, 20	mation is required by 37	CFR 1.311. The informat	ion is required to obtai 1.14. This collection y depending upon the he Chief Information (COMPLETED FORM	in or in is estimated in or individual of the control of the contr	retain a benefit by the pul	olic which is to file (an es to complete, includi- tis on the amount of ti- mark Office, U.S. Dep ND TO: Commissioner	d by the USPTO to processing gathering, preparing, and me you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.